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/SB/05 (2/98)

UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attome	ey Docket No.	TI-2949	3
First N	amed Inventor or Application	ldentifier	Jacek Stachurski
Title	Zero-Phase Equal	ization S	peech Coding and
	System		

EL547747134US

On Page 1 of the specification, before line 1, insert -This application claims priority under 35 USC § 119(e)(1) of provisional application number 60/155,438 filed 09/22/1999.--

APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application	ADDI	RESS	Assistant Commissioner for Patents of Box Patent Application Washington, DC 20231						
*Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	6.		Microfiche Computer Program (Ap	pendix) 50					
2. Specification [Total Page 2] (preferred arrangement set forth below)	ages 36	¹ 7.		eotide and/or Amino Acid Sequence plicable, all necessary)	n 📻				
Descriptive title of the Invention Cross References to Related Applications			a.	Computer Readable C	ору				
 Statement Regarding Fed sponsored R&D Reference to Microfiche Appendix 	ē	b.	Paper Copy (identical to computer copy)						
- Background of the Invention - Brief Summary of the Invention		c. Statement verifying identical of above copies							
- Brief Description of the Drawings (if filed) - Detailed Description		ACCOMPANYING APPLICATION PARTS							
- Claim(s) - Abstract of the Disclosure		8.	ΙX	Assignment Papers (cover sheet &	& Documents(s))				
3. X Drawing(s) (35 USC d113) [Total Sh	neets 14	J 9.		37 CFR §3.73(b) Statement (when there is an assignee)	Power of Attomey				
4. Oath or Declaration [Total Pa	ges 2	<i>]</i> 10.		English Translation Document (if a	applicable)				
a. X Newly Executed (original or copy)		11.		Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations					
b. Copy from a prior application (37 CFR §1.6 (for continuation/divisional with Box 17 com		12.		Preliminary Amendment					
[Note Box 5 below]		13.	X	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
i. DELETION OF INVENTOR(S) Signed statement attached deleti named in the prior application,	ing inventor(s)	14.		*Small Entity Statement filed in prior application Statement(s) Status still proper and desired (PTO/SB/09-12)					
see 37 CFR §1.63(d)(2) and 1.33	15.		Certified Copy of Priority Document(s) if foreign priority is claimed)						
5. Incorporation By Reference (useable if Box 4b is characteristics). The entire disclosure of the prior application, from vite the entire disclosure of the prior application, from vite the entire disclosure of the prior application.	16.		Other:						
the oath or declaration is supplied under Box 4b, is being part of the disclosure of the accompanying an hereby incorporated by reference therein.		A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.							
17. If a CONTINUING APPLICATION, check appropriat	te box and supp								
	☐Continuatio	n-in-par	t (CIP)						
Prior application information: Examiner				Group / Art Unit:					
18. CO	RRESPOND	ENCE A	ADDRI	ESS					
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Correspondence address below									
NAME									
ADDRESS CITY STA	TE			ZIP CODE					
COUNTRY TELEPHO	^{NE} (972) 9	917-43	65	FAX	(972) 917-4418				
Name (Print/Type) Carlton H. Ho	oel		Reg	nistration No. (Attorney/Agent)	29,934				
Signature	420	1		Date	9/22/00				

EXPRESS MAIL Mailing Label No. EL5477134US DATE:

Signature

ed for use through 09/30/2000. OMB 0651-0032 Patent and Trac

09/22/2000 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unle

Office: U.S. DEPARTMENT OF COMMERCE displays a valid OMB control number.

FEE TRANSMITTA	L
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Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997 Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

Complete If Known Application Number Filing Date 09/22/2000 First Named Inventor Jacek Stachurski **Examiner Name** Group / Art Unit

TOTAL AMOUNT OF PAYMENT (\$) \$690						Attorney Docket No. TI-29493							
METHOD OF PAYMENT							FEE CALCULATION (continued)						
The Commissioner is hereby authorized to charge to the following Deposit Account,						3.	ADDIT	IONAL	FEES		(
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SUBMITTED BY											Complete (if app	licable)	
Typed or Printed Name Carlton H. Hoel										Reg. Number	29,934		
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